

Insights from  
domestic  
and  
international  
emergency  
work



# COMPARE the US to SIERRA LEONE

Sierra Leone ▼

COMPARE

VIEW A FULL LIST OF COUNTRIES

COMPARE SIERRA LEONE TO OTHER COUNTRIES

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If Sierra Leone were your home instead of The United States you would...

die **22.17 years** sooner

more info ▼

be **11.9 times more** likely to die in infancy ▼

make **97.35% less** money ▼

use **99.81% less** electricity ▼

spend **98.92% less** money on health care ▼

consume **97.46% less** oil ▼

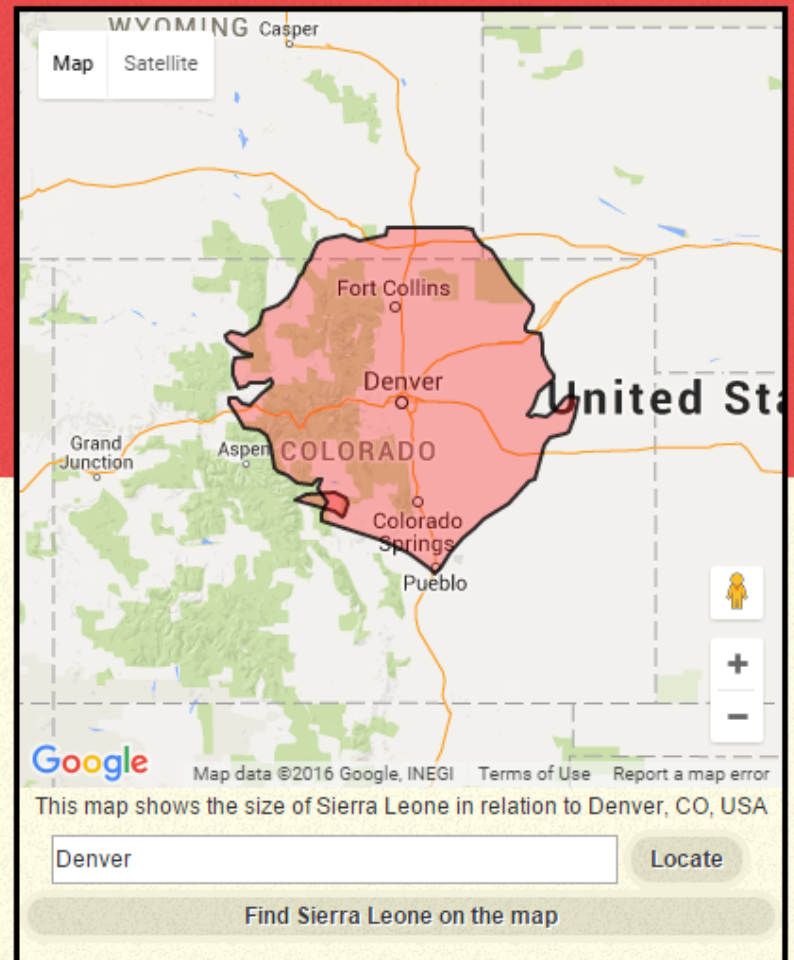
be **91.26% less** likely to be in prison ▼

be **2.5 times more** likely to have HIV/AIDS ▼

experience **39.78% more** of a class divide ▼

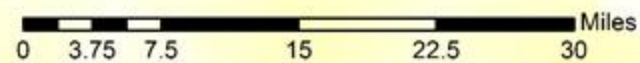
be **52.63% less** likely to be murdered ▼

have **2.8 times more** babies ▼



<http://www.ifitweremyhome.com/compare/US/SL>

## Port Loko Sections Map





## Social Mobilization Contact Persons

**Oxfam**

Contact Person: Alfred Amara  
Tel: 078-115-950  
Email: [Aamara@oxfam.org.uk](mailto:Aamara@oxfam.org.uk)

**Restless**

Contact Person: Mohammed Laho Bah  
Tel: 078-268669  
Email: [Mohamedl@restlessdevelopment.org](mailto:Mohamedl@restlessdevelopment.org)

**Red Cross**

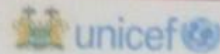
Contact Person: Santigle Ibrahim Kamara  
Tel: 079-517560; 076-171727  
Email: [skamara@sierraleoneredcross.org](mailto:skamara@sierraleoneredcross.org)

### PORT LOKO Contact Persons

Anthony Kenneh (DHMT)  
Tel: 078-338165  
Email: [anthonykenneh@yahoo.com](mailto:anthonykenneh@yahoo.com)

Richard Gborie (DHMT)  
Tel: 088-531295  
Email: [richardgborie@yahoo.com](mailto:richardgborie@yahoo.com)

Joy (UNICEF)  
Tel: 076-464069  
Email: [jcaminade@unicef.org](mailto:jcaminade@unicef.org)



PORT LOKO Social Mobilization Pillar



GOVERNMENT OF SIERRA LEONE  
MINISTRY OF HEALTH AND SANITATION  
PORT LOKO DISTRICT EBOLA EMERGENCY RESPONSE CENTER

EBOLA AFFECTS EVERYONE

**EVERYONE**

(Including Government Officials, VIPs, Police, Military, International Organizations, NGOs, all  
Drivers and riders)


**MUST EXIT THEIR VEHICLE OR BIKE FOR HANDWASHING AND FEVER SCREENING**

**DAY OR NIGHT! RAIN OR SHINE!**

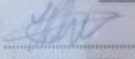
**SCREENERS WILL PROVIDE WASHING SUPPLIES**

**WHEN YOU EXIT THE VEHICLE OR BIKE**

**REMINDER: BRIBERY TO PASS A CHECKPOINT IS ILLEGAL**

  
HON. LAMOND KABIA  
DISTRICT COORDINATOR  
PORT LOKO DERC

DISTRICT CO-ORDINATOR  
DERC PORT LOKO DIST  
19 OCT 2015  
SIGNATURE

  
MR. MICK ROBSON  
TEAM LEADER/OPS & LOG ADVISER  
PORT LOKO DERC

# 2014 EBOLA

2014 CDC Ebola Response Organization Chart  
 1 JUNE 2015 (0000)  
 CDC EOC Duty Officer (available) 24/7/365 at 770-488-7100  
 2014 Ebola Response (CDC): eoevent240@cdc.gov  
 email: eoevent240@cdc.gov  
 Link: http://eoms.cdc.gov/

Command and Specialty Staff
Scientific Response Section (SRS)
Liaison Officers (LNO)
Operations Section (OPS)
Planning Support Section (Plans)
Logistics Support Section (LOG)
Emergency Personnel Staffing Section (EPSS)
Finance and Procurement Section
Situational Awareness Unit (SA)
Joint Information Center (JIC)

**CDC Director**  
**Dr. Frieden**

**Incident Manager**  
**Dan Jernigan**  
 eoim@cdc.gov

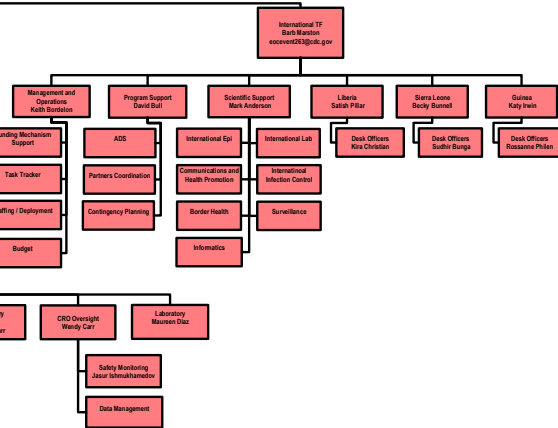
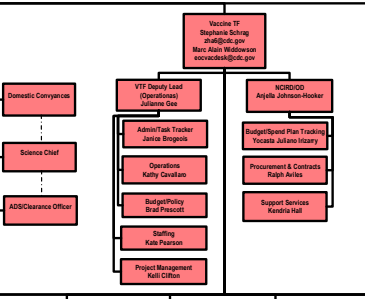
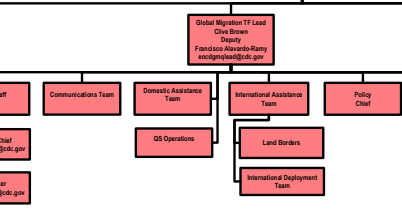
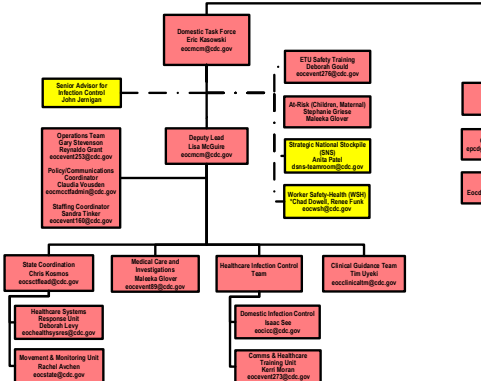
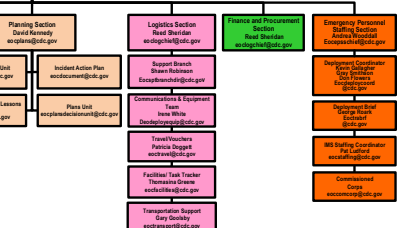
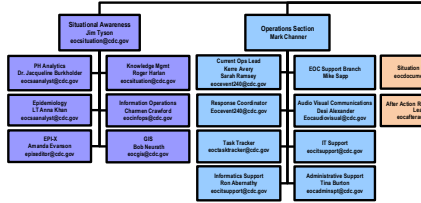
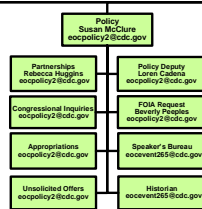
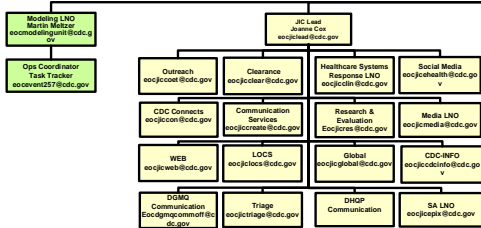
**Deputy Incident Manager**  
**Michael Beach**  
 eoimdc@cdc.gov

**Deployment Risk Mitigation**  
 Jeff Hembauer  
 JPH1@cdc.gov

**ADS**  
 Ym Sinks  
 eoacs@cdc.gov

**CSO**  
 Barbara Knust  
 eoacs@cdc.gov

**Chief of Staff**  
 Liz Bell  
 eochief@cdc.gov



# Presidency

## Interministerial Committee

### National Coordination

Coordinateur National : Dr. Sakoba Keita  
Coordinateur National Adjoint : Dr. Sékou Condé

Membres de la Coordination: MSF, CDC, UNMEER, CRG, UA/ASEOWA, MAE-Fr, Dr Momboli, Dr Diakité, OOAS, ELU, Mano River Union, CRF

Surveillance OMS; Dr. Pépé Bilvogui	Treatment MSF; Dr. Mounié Barry	Communication UNICEF; M. Fodé Tass Sylla	Sanitation and Body Management IFRC; Dr. Youssef Traoré	Research Pr Kader Conde Dr Momboli
Contact Tracing – <i>epidemiologist (1)</i>	Infection Prevention in Sanitation Structures	Prevention Communication	Body Transport	Clinical Research Medication
Investigations – <i>epidemiologist (2)</i>	Assistance to Health Establishments of the Ministry	Rumor Management	Secure Burials	Clinical Research Vaccines
Epi Data & Reports	Management of Ebola Treatment Centers – <i>clinicians (2)</i>	Social Mobilization:	Environmental Decontamination	Qualitative Research – <i>expert in monitoring and evaluation</i>
Airport and Borders	Provisionary Centers for Ebola Treatment – <i>clinicians (2)</i>	Public Relations	Sanitation and Pulverization	Epidemiological Research
Lab	Decontamination of Hospitals	Prevention of Community Infection		Biological Research
117	Waste Management	Village Watch Committees		

Training MAE-F: Pr Migliani DPLM: Richard James	Human Resources UNMEER; Dr Fatou Sakho	Logistics ELU; Dr. Moussa Konaté	Finances PNUD; Banque Mondial; M Barry	Data Management OMS, ELU	Security UNDRS; Colonel Mamadou Saliou Baldé
Doctors and Nurses	Personnel of the National Coordination – <i>administrative assistants (8); IMS specialists (5)</i>	IT – IT and network manager	Payment of indemnities	Situation Awareness	Security Coordination Cell
Community Agents	Personnel of Prefectural Coordination	Building Management – <i>handyman</i>	Economic Operations	Documentation	Security Borders
Laboratorians	Personnel of Treatment Centers	Construction	Accounting – <i>accountant</i>	Health Bulletin	Security Affected Areas
Social Mobilizers	Community Agents	Logistics for Trucks – <i>logistics for vehicles</i>	Internal Audit	Follow-Up and Evaluation of Tasks	Security Transport
Hygienists	Doctors and Nurses of the MoH	Land and Air Transport	Collect and Management of Funds		EOC
Data Management – <i>archivist</i>	Lab Personnel	Pre-Positioning and Distribution of Stocks – <i>IT and logistics for PCG</i>			
Logisticians	Guinean Red Cross Personnel	Quantification et Orders			

## Technical

## Support





# National Ebola Response Centre (NERC)



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« January »

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24	25	26	27	28	29	30
31						

○ Hazard Pay Policy

## Zero Ebola Campaign – Women in Yellow on Thursday 26<sup>th</sup> March

Women are agents of change and champions in the Ebola fight. Our mothers, sisters and daughters have played key roles in helping our families get early treatment and make the right decisions. As a symbol of the hope and energy that women bring, all women in Sierra Leone are asked to show their solidarity towards ending Ebola by wearing yellow on Thursday 26<sup>th</sup> March, the day before the Stay at Home begins. *Lets end this together...*

- Daily District Data
- Aggregated District Daily

### EBOLA BIG IDEA

Soon We Will Defeat Ebola: What's Next?  
October 19 – November 19, 2015



## EVD COUNTDOWN ZERO + 42 (D Day 7th November 2015)

00 : 00 : 00 : 00

0 days, 0 hours, 0 minutes and 0 seconds left

## EVD Daily MoHS Update

EVD Update December 24, 2015  
PROVIDED BY :  
The Ministry of Health and Sanitation

Search

### State House

The president of the republic of sierra Leone at the declaration of the end of the Ebola outbreak disease in Sierra Leone, Bintumani conference centre Freetown 7 November 2015

Read More...

statehouse.gov.sl

### SERVICE LEVEL AGREEMENT

A guide for implementing partners supporting the public health sector in Sierra Leone JULY 2015

### Public Notice

On Behalf of the Sierra Leone National Ebola Response Centre (NERC) and the World Health Organisation (WHO)

Note to Correspondents

Subject: Ebola transmission in Sierra Leone over. Nation enters 90-day enhanced

## Pillars:

*Child Protection and Psychosocial, Case Management, Communications, Logistics, Safe Burials, Social Mobilization, Surveillance, Coordination, Food Security*





DERC





**Port Loko District**  
**Rapid Assessment on Understanding Health Seeking Behavior**  
**Informant Interviews**

**Responders Information:**

Chiefdom: \_\_\_\_\_ Section: \_\_\_\_\_ Village: \_\_\_\_\_

Sex: \_\_\_\_\_ Age: \_\_\_\_\_

Catchment PHU: \_\_\_\_\_ Type of PHU \_\_\_\_\_

Number of patients (July – Sept. 2013): \_\_\_\_\_ Number of patients (July – Sept. 2014) \_\_\_\_\_

Number of patients (July – Sept. 2015): \_\_\_\_\_

Good Morning/Afternoon,

My name is \_\_\_\_\_, and I am here with \_\_\_\_\_. We are working with CDC as part of the Ebola response. I just recently came to Sierra Leone, but \_\_\_\_\_ knows the country very well, so that is why we are working together. We are pleased to talk with you. We would like to understand more about how people in your community decide what to do when they get sick and what people and places help you become well. We are asking these questions about ALL sicknesses, not just Ebola.

We can skip any question you feel uncomfortable answering, and we can stop at any time. I would like to take notes to gather your comments, but we will not record your name.

**Consent:** *Would you be willing to answer our questions? (if “no”, thank them for their time or let them go if you are in a group. If they yes, continue with the interview)*

Thank you for this opportunity to learn from you. We are so glad that you are able to meet with us today. Do you have any questions before we begin?

**Demographics**

1. How old are you?

**Health Seeking Behaviors / Common & Critical Health Problems**

2. What are the ways that people stay healthy or keep sickness away?
  - a. (If people have not named healthy behaviors they do for themselves) What do you or members of your family do at home to keep sickness away?
3. Who from your family or people who care about you notices when you are sick?
4. When someone gets sick in your community, what do they do about it? (Does it always happen this way?)



Yu de fil sik? Aw?



**Rapid  
Behavioral  
Assessments**



# Major Findings and Recommendations

- Overall Social Mobilization
- Use of 117
- ETUs and Ambulances
- Social Stigma around Ebola Response Systems and Practices
- Prevention-Focused, Community-Owned Health Care
- Health-Seeking Behaviors and the Relationship between PHUs and Traditional Healers





Soon We Will Defeat Ebola: What’s Next?

October 19 – November 19, 2015

It has been over a year since Mama Salone had her first case of Ebola. For many of us, our family, and friends have been affected by this outbreak. Yet, now is a good time to look back, to see how far we have come and use what we have learned to make our country even greater than before.

- To date, there has been more than 8,700 laboratory confirmed Ebola cases, over 4,000 patients discharged from treatment centers, and over 3,500 deaths from this outbreak.
- The good news is that we have no new cases and everyone is out of quarantine, so what’s next?

As a result of the Ebola response, we are now practicing new, healthy behaviors. People need to remain committed to practicing these behaviors which promote health and wellness.

- Keep washing your hands frequently with soap and water, and do not touch people who are sick or who have died.
- Be watchful of symptoms: Fever, severe headache, tiredness, muscle pain, and diarrhea. Call 117 or your district hotline immediately if you think you have Ebola symptoms.
- Continue to treat any deaths as if they could be Ebola. Do not touch, kiss, clean, wash, wrap, or bury the body. Call 117 to report all deaths so they can have a safe and dignified burial.

Thousands of people have learned new skills in new jobs, and we are having new conversations that have helped us stop Ebola. New health facilities have been built or reconditioned, and in the future we can use them to meet other health needs in our communities. These new jobs, facilities, and skills can be used improve our community’s health and fight current health conditions that are still with us.

- Staff at checkpoints have learned how to take temperatures and set up handwashing stations. People passing through the checkpoints learned about the importance of handwashing.
- Staff at health facilities and Ebola Treatment Units learned about the importance of infection prevention and control measures; they have added handwashing stations, taken temperatures, and learned how to put on and take off PPE (personal protective equipment).
- Burial and ambulance team workers, contact tracers, psychosocial team members and thousands of social mobilizers have learned how to communicate and interact with the public in respectful ways that have stopped the spread of Ebola.
- Traditional, religious, and community leaders, and DERC leadership learned how to explain Ebola and discuss the importance of these new healthy behaviors.
- With the development of 117, operators have been trained with telephone skills to help support the caller and report the alert.
- The new skills that we have learned support healthy behaviors in our homes, businesses, schools, mosques, and churches.

Survivors are very important to Sierra Leone. They are a symbol of the strength, courage, and perseverance of our country. They will continue to play important roles during recovery, and should be treated with respect.

- Survivors have helped with contact tracing and quarantine. They have worked as members of ambulance, burial, and health care teams and provided care and support as new survivors were released from health facilities and quarantines. They have also worked in Ebola Treatment Centres, trained to be social mobilizers, and helped provide psychosocial support to community members.
- Survivors deserve our respect and should be welcomed back into their communities. They do not pose a risk to their families or communities through casual contact such as living in the same house as a survivor, sitting next to them, buying food, and eating with them.

So what’s next? How do we keep the people, skills, and conversations active in our communities?

- Let’s continue to practice these skills and healthy behaviors so we are ready if Ebola returns.
- We can build upon these skills and use them to address other health problems.
- The new things and skills we have learned support healthy behaviors and have changed our conversations about how to take an active role in determining the outcome of the Ebola epidemic. Everyone has played an important role in stopping Ebola. Now everyone can take what we have learned and continue to practice healthy behaviors to make our nation strong.

We have the power to not only stop Ebola, but also to end other health problems and be safe and healthy. Let’s keep the conversations going in your community, your family, and Mama Salone!

Port Loko Healthy Behaviors Skit - Krio

**NJS MARY** (I enta en salut): Gud ivin chif.

**Pa ALIMAMY**: Gud ivin nɔs, duya sidon. Yu go lek fɔ it dina wit mi?

**NJS MARY**: Yes sa

**Pa ALIMAMY (I kɔl)**: Kadi! Kadi!

**KADIE**: Yes dadi!

**Pa ALIMAMY**: Duya kam wit di sup we yu dɔn kuk fɔ wi  
*(I go; I kam bak)*

**KADIE**: Luk di sup dadi...(I pin di bol na di tabul).

**Pa ALIMAMY**: Duya go kam wit kiln wata fɔ was wi an.  
*Pa ALIMAMY no was in an fayn bikas inɔ yus sop*

**NJS MARY**: Chif – I gud we yu de was yu an bɔt yu fɔ was dem fayn wit sop en wata.

**Pa ALIMAMY**: Kadi – go kam wit di sop.  
*(Di Chif and Nɔs Mary den ɔltu was an wit sop en wata).*

**Pa ALIMAMY** (I laf): Hahaha, Nɔs Mary yu na intresin pɔsin. Yu nɔba fɔget bɔt yu wel bɔdi biznes.

**NJS MARY**: Dat na mi wok. Nɔbɔdi nɔ go tel mi wetin a fɔ du mɔ lek we wi dɔn lan bɔku tin bɔt wel bɔdi biznes den pas tu yia ya.

**Pa ALIMAMY**: Nami sen kɔl yu fɔ mek a go no wetin de apin naw as wi de kik Ebola na di kɔna en fɔ seka dat, a go de visit di chif dem.

**NJS MARY (Giggle)**: O chif! Yu de wɔri bɔt Ebola. A lek yu kɔnsan fɔ yu pipul dem bɔt wi kɔnsan nɔ fɔ bi fɔ Ebola nɔmɔ.

**Pa ALIMAMY**: Nɔs Mary, yu kin tel mi di sik dem we de ambɔg mi kɔminiti?



THE SCIENCE AND TECHNOLOGY OF BEHAVIOR CHANGE

February 8-9, 2016

San Diego, California

# 4 Pathways to Behavior Change

- Knowledge
  - Ability
- Norms
- Exchange

# How did I get there?

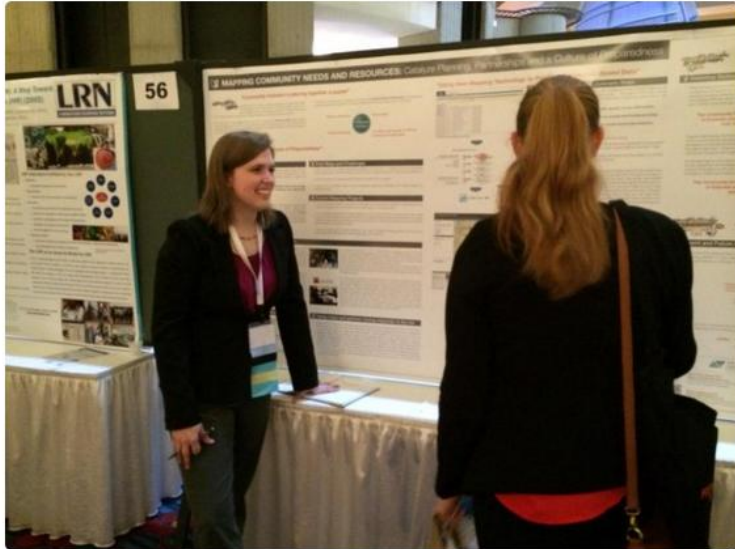


Rocky Mountain MRC  
@RMMRCCO



Following

MRC member [@avothsiebert](#) [@prep15](#) doing one of her day jobs!



RETWEET

1

LIKE

1



11:58 AM - 16 Apr 2015



Reply to [@RMMRCCO](#) [@prep15](#)



Meredith Li-Vollmer [@MeredithLV](#) · 15 Apr 2015

Speak French? Have emergency management background? CDC needs you. [#prep15](#)



Aimee Voth Siebert [@avothsiebert](#) · 15 Apr 2015

[@MeredithLV](#) Is there someone from CDC that they would instruct a French-speaking emergency management types to talk to?



Meredith Li-Vollmer [@MeredithLV](#) · 15 Apr 2015

[@avothsiebert](#) I heard this at presentation by Jennifer Brooks, Div of Emergency Operations, CDC.



Aimee Voth Siebert

[@avothsiebert](#)

[@MeredithLV](#) thank you!

10:29 AM - 15 Apr 2015



Reply to [@MeredithLV](#)







# Aimee Voth Siebert

aimee.vothsiebert@state.co.us



- MAIDP '12
  - [http://www.du.edu/learn/graduates/alumni\\_spotlight/alumnisiebert.html](http://www.du.edu/learn/graduates/alumni_spotlight/alumnisiebert.html)
  - <http://www.du.edu/gspp/alumni/40/features.html>
- CDPHE Office of Emergency Preparedness and Response
  - Disaster Behavioral Health Specialist
  - Community Inclusion Coordinator
  - <http://kdvr.com/2015/06/28/disaster-to-courage-du-psychology-students-help-communities-recover/>
- Health Promotion Specialist with CDC Sierra Leone Ebola Response
  - <https://www.colorado.gov/pacific/cdphe/news/heart-emergency>
  - <http://www.aimeeinsierraleone.wordpress.com>